BEST AVAILABLE COPY

										Application or Docket Number					
	PATENT A				RD										
			=ffective	e Decemb		09 612067									
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL TYPE	ENTITY	OR	OTHER SMALL			
FO	R		NUMBE	R FILED		NUMBER	EXTRA		RATE	FEE	1	RATE FEE			
BASIC FEE			and the second s							345.00	OR	: -	690.00		
TOTAL CLAIMS			minus 20=			• 4			X\$ 9=		OR	X\$18=	72		
INDEPENDENT CLAIMS			3 minus 3 =						X39=		OR	X78=			
MU	LTIPLE DEPEN	DENT	CLAIM PRESENT						+130=		OR	+260=			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2										OR	TOTAL	762		
	CLAIMS AS AMENDED - PART II											OTHER	THAN		
		_	umn <u>1)</u>		(Column 2)	(Column 3)	1 .	SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A	129/13	REM A	AIMS IAINING FTER NDMENT		Р	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
IDME	Total	. (72	Minus	**	24	=		X\$ 9=		OR	X\$18=			
AME	Independent	*	3	Minus	**		=		X39=		OR	X78=	·		
	FIRST PRESE	NTATIO	ON OF MU	JUNPLE DEI	ΈN	DENT CLAIM			+130=		OR	+260=			
						TOTA			TOTAL						
		(Ca)	umn 1)		,	Column 2)	(Column 3)		ADDIT. FE	E		ADDIT. FEE			
	34 6 A \	Cl	AIMS			HIGHEST				ADDI-	1		ADDI-		
AMENDMENT B	3/24/04	Α	MAINING FTER NDMENT		F	NUMBER PREVIOUSLY PAID_FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	. (72	Minus		25	=		X\$ 9=		OR	X\$18=			
	Independent	*	3	Minus		·· 3	=		X39=		OR	X18=			
_	FIRST PRESE	NTATIO	ON OF MULTIPLE DEPEN			IDENT CLAIM			+130=			+260=			
									TOTA		OR	TOTAL			
			•						ADDIT. FEI		OR	ADDIT. FEE	L		
			umn 1)	,	(Column 2) HIGHEST	(Column 3)				_				
AMENDMENT C		REM A	_AIMS IAINING FTER NDMENT		F	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•		Minus	**	•	=		X\$ 9=		OR	X\$18=			
	Independent	*		Minus	•	**	=		X39=			X78=			
٧	FIRST PRESE	NTATI	ON OF MI	ULTIPLE DE	PEN	DENT CLAIM]	-	+	OR	 			
	f the entry in colum	mn 1 ic	lace than t	na antre in cole	imo ,	2 write "O" in co	olumn 3	i	+130=		OR	+260=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."															
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											:				

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09 6(2067

Total Fee Calculation

_		•	والمالية والمالية والمناطقة	ט ג		
·	For Carte	Total # (Hom)	Souther Even V	For	Foo	· T.v.
Basic Filing Fee	Sm./L2 201-101			Sim Earley	La Entity	* Total
Total Claim; >20	207.103	24	4			690
Independent Claim; >;	202/102	3	• — .			7
Mult. One Claum Present	204 (1):		· ·			
Surahunga	20 % (1.1)				:	
English Teastlation	1;0				·	130/45
TOTAL FEE CALCULA	71034					
Fees due upon filing the	e application					593.
Total Filing Fees One =	s	892				
Less Filing Fees Submin	ed . 5	0				
BALANCE DUE	= 5	892				
<u> </u>						
Office of Initial Patent Exa	เ กน์กลเเอก	 .				
•						